Date of Deposit

I hereby certify that this Transmittal Letter, enclosed application and any other documents referred to as enclosed herein, age being deposited in an envelope with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR §1.10 on the date indicated above and addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Jennifer L. Mahoney

(Print Name of Person Mailing Application)

Transmittal of Utility Patent Application for Filing Under 37 CFR §1.53(b)

Box Patent Application Assistant Commissioner for Patents Washington, D.C. 20231

Sir:

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Transmitted herewith for filing is a utility patent application by inventors: Dan Boneh, Rajeev Chawla, Alan Frindell, Eu-Jin Goh, Nagendra Modadugu, and Panagiotis Tsirigotis, and entitled:

METHOD AND APPARATUS FOR TRANSPARENT ENCRYPTION

1. Enclosed are:

- This Transmittal letter. \boxtimes
- One stamped, self-addressed postcard for PTO date stamp. \boxtimes
- Certificate of Express Mail. Ø
- One utility patent application containing text pages 1-24 and \boxtimes
 - 6 Sheets of drawings.
- Declaration of inventorship
- 1 Assignment(s) for recordation with transmittal sheet.
- Executed Power of Attorney by Assignee X

2. U.S. Priority

- This application claims the benefit of U.S. Patent Application Nos. 60259,754 and \boxtimes 60/259,786 filed January 4, 2001, 09/877,302 and 09/877,655 filed June 8, 2001 and 09/901,350 filed July 9, 2001, all of which are incorporated herein by reference.
- Conditional Petition for Extension of Time: An Extension of Time is requested to \boxtimes provide for timely filing if required to establish copendency with the parent after all papers filed herewith have been considered.

- 3. Foreign Priority
 - Priority of Application No. filed in on is claimed under 35 USC §119.
 - A certified copy of this priority document is enclosed.
- 4. Fees

The filing fee has been calculated as shown below:

Por:	(Col. 1) No. Filed	(Col. 2) No. Extra	Small Entity			Other Than a Small Entity	
			Rate,	Fee		Rate	Fee
Basic Fee				\$370.00	or		\$740.00
Total Claims	28 - 20	8	x \$9 =	\$	or	x \$ 18 =	\$144.00
Independent Claims	10 - 3	7	x \$42 =	\$	or	x \$ 84 =	\$588.00
☐ Multiple Dependent Claim Presented			+ \$140 =	\$	or	+ \$280 =	\$
*If the difference in Col. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$	Or	TOTAL	\$1472.00

- \boxtimes Please charge Deposit Account 50-0665 in the amount of \$1472.00.
- The Commissioner is hereby authorized to charge fees under 37 CFR §1.16 and §1.17 which may be required, or credit any overpayment to Deposit Account 50-0665.

Respectfully submitted,

Richard L. Gregory, Yr. Registration No. 42,607

Date: 01-02-2002

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